

Preventing unnecessary claim denials

Unnecessary claim denials can cost you valuable time. In many cases, these claim denials can be avoided by ensuring your claims include the correct information. We created this document to help you avoid some of the most frequent claim issues and limit unnecessary complications.

Avoiding frequent errors

The following are 2 mistakes we frequently see, along with solutions to help you avoid them:



Unregistered taxonomy codes

Issue: The Hoosier Care Connect Community Plan doesn't require you to bill any rendering, attending or billing taxonomies on Professional CMS-1500 or Institutional UB-04 claim forms. However, if you do bill any taxonomy codes, those codes must be registered with the state Medicaid program, Indiana Health Coverage Programs (IHCP).

Solution: Make sure you check that the taxonomy code you are billing is registered with the IHCP before you submit your claim.



Incorrect service location information issues: To process claims accurately, the billing provider's national provider identifier (NPI)/provider service location must match the IHCP provider data file. If you bill a claim with an NPI and/or service location address, including zip plus 4, that is not registered with the IHCP, we'll deny the claim.

Solution: To avoid any disruptions, verify that all provider demographic information billed on the claim matches the IHCP provider data file. If you notice a discrepancy or error in the IHCP provider data file, please refer to [FAQs – Top 10 Questions](#) section of the [Indiana Medicaid: Providers](#) website to learn more about making changes to the IHCP provider data file.



For claims, billing and payment questions, go to UHCprovider.com/claims. Please use our online options or phone number.